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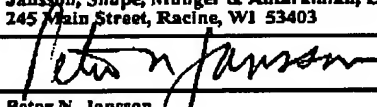
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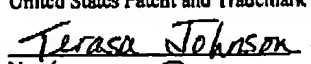
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/600,373	
	Filing Date	June 20, 2003	
	First Named Inventor	Leslie W. Richards	
	Art Unit	1722	
	Examiner Name	Heckenberg, Jr., Donald	
Total Number of Pages in This Submission	12	Attorney Docket Number	CM-101US

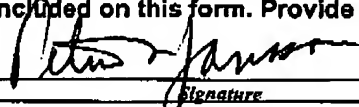
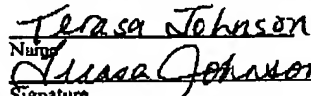
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Printed name	Peter N. Jansson		
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AMENDMENT TRANSMITTAL LETTER (Small Entity)					Docket No. CM-101US	
Applicant(s): Richards						
Application No. 10/600,373	Filing Date 06/20/2003	Examiner Heckenberg, Jr., Donald	Customer No. 24314	Group Art Unit 1722	Confirmation No. 8509	
Invention: Plug Baffle Device for Mold						
COMMISSIONER FOR PATENTS:						
Transmitted herewith is an amendment in the above-identified application.						
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27						
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	24 -	28 =	0	x \$25.00	\$0.00	
INDEP. CLAIMS	4 -	4 =	0	x \$100.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 10-0270 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 Peter N. Jansson, Reg. No. 26,185 Jansson, Shupe, Munger & Antaramian, Ltd. 245 Main Street Racine, WI 53403 262-632-6900			Dated: November 8, 2005 CERTIFICATE OF FACSIMILE TRANSMISSION I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on the date shown below: <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="text-align: center;">  Terasa Johnson Signature </div> <div style="text-align: center;"> NOV. 8, 2005 Date </div> </div>			
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